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B1 (Official Form 1) (1/08) UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS **Voluntary Petition CHICAGO DIVISION (EASTERN)** Name of Debtor (if individual, enter Last, First, Middle): Name of Joint Debtor (Spouse) (Last, First, Middle): CHAIRES, DEBORAH All Other Names used by the Debtor in the last 8 years All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): (include married, maiden, and trade names): aka Deborah Torrez; aka Deborah Escovebo Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): xxx-xx-5508 than one, state all): Street Address of Debtor (No. and Street, City, and State): Street Address of Joint Debtor (No. and Street, City, and State): 2121 Lewis Avenue North Chicago, IL ZIP CODE ZIP CODE 60064 County of Residence or of the Principal Place of Business: County of Residence or of the Principal Place of Business: **LAKE** Mailing Address of Debtor (if different from street address): Mailing Address of Joint Debtor (if different from street address): ZIP CODE ZIP CODE Location of Principal Assets of Business Debtor (if different from street address above): ZIP CODE Type of Debtor Nature of Business Chapter of Bankruptcy Code Under Which (Form of Organization) (Check one box.) (Check one box.) the Petition is Filed (Check one box.) Health Care Business $\overline{\mathbf{Q}}$ Chapter 7 Chapter 15 Petition for Recognition Single Asset Real Estate as defined Chapter 9 Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. in 11 U.S.C. § 101(51B) of a Foreign Main Proceeding Chapter 11 Railroad Chapter 15 Petition for Recognition Corporation (includes LLC and LLP) Chapter 12 Stockbroker of a Foreign Nonmain Proceeding Chapter 13 Partnership Commodity Broker Other (If debtor is not one of the above Clearing Bank **Nature of Debts** entities, check this box and state type (Check one box.) of entity below.) Debts are primarily consumer Debts are primarily Tax-Exempt Entity debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a business debts. (Check box, if applicable.) Debtor is a tax-exempt organization under Title 26 of the United States personal, family, or house Code (the Internal Revenue Code) hold purpose. Filing Fee (Check one box.) **Chapter 11 Debtors** Check one box: Full Filing Fee attached. Debtor is a small business debtor as defined by 11 U.S.C. § 101(51D). Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Filing Fee to be paid in installments (applicable to individuals only). Must attach Check if: signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. Debtor's aggregate noncontigent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. Filing Fee waiver requested (applicable to chapter 7 individuals only). Must Check all applicable boxes: attach signed application for the court's consideration. See Official Form 3B. plan is being filed with this petition. Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). Statistical/Administrative Information THIS SPACE IS FOR COURT USE ONLY Debtor estimates that funds will be available for distribution to unsecured creditors. Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. **Estimated Number of Creditors** 25,001-Over **☑** 50-99 ___ 10,001-**___** 200-999 ___ 1,000-<u>|</u> 5,001-50,001-∐ 100-199 5.000 10.000 25.000 50.000 100.000 100.000 Estimated Assets \$50,001 to \$100,001 to \$500,001 \$50,000,001 \$0 to \$1,000,001 \$10,000,001 \$100,000,001 \$500,000,001 More than \$50,000 \$100,000 \$500,000 to \$1 million to \$10 million to \$50 million to \$100 million to \$500 million to \$1 billion \$1 billion Estimated Liabilities \$50,001 to \$100,001 to \$500,001 \$1,000,001 \$10,000,001 \$50,000,001 \$100,000,001 \$500,000,001 More than

to \$100 million

to \$500 million

to \$1 billion

\$1 billion

to \$50 million

\$500,000

to \$1 million

to \$10 million

\$50,000 \$100,000

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	luntary Petition	Name of Debtor(s): DEBORAH	CHAIRES
(Tr	nis page must be completed and filed in every case.)		
	All Prior Bankruptcy Cases Filed Within Last	1	
Nor	tion Where Filed: ne	Case Number:	Date Filed:
Loca	tion Where Filed:	Case Number:	Date Filed:
	Pending Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debtor (If m	nore than one, attach additional sheet.)
Nam	e of Debtor:	Case Number:	Date Filed:
Distri	ct:	Relationship:	Judge:
10Q	Exhibit A per completed if debtor is required to file periodic reports (e.g., forms 10K and and an and Exchange Commission pursuant to Section 13 or 15(d) are Securities Exchange Act of 1934 and is requesting relief under chapter 11.) Exhibit A is attached and made a part of this petition.	whose debts a I, the attorney for the petitioner name informed the petitioner that [he or sh of title 11, United States Code, and h	Exhibit B eted if debtor is an individual are primarily consumer debts.) ed in the foregoing petition, declare that I have ee] may proceed under chapter 7, 11, 12, or 13 ave explained the relief available under each ave delivered to the debtor the notice
		X /s/ Kenneth S. Borcia	07/28/2008
		Kenneth S. Borcia	
	Ex	hibit C	- 100
Doe:	s the debtor own or have possession of any property that poses or is alleged to pose Yes, and Exhibit C is attached and made a part of this petition. No.	e a threat of imminent and identifiable ha	rm to public health or safety?
	Ex	hibit D	
(То	be completed by every individual debtor. If a joint petition is filed, each Exhibit D completed and signed by the debtor is attached and m	·	ch a separate Exhibit D.)
If th	is is a joint petition: Exhibit D also completed and signed by the joint debtor is attach	ed and made a part of this petition	ո.
	Information Regard	ling the Debtor - Venue	
		applicable box.)	
	Debtor has been domiciled or has had a residence, principal place of preceding the date of this petition or for a longer part of such 180 day		is District for 180 days immediately
	There is a bankruptcy case concerning debtor's affiliate, general partr	ner, or partnership pending in this	District.
	Debtor is a debtor in a foreign proceeding and has its principal place principal place of business or assets in the United States but is a defeor the interests of the parties will be served in regard to the relief sou	endant in an action or proceeding	
	Certification by a Debtor Who Resid		roperty
	(Check all ap Landlord has a judgment against the debtor for possession of debtor's	oplicable boxes.) s residence. (If box checked, com	nplete the following.)
	-	Name of landlord that obtained ju-	dgment)
	· · · · · · · · · · · · · · · · · · ·	,	<i>,</i>
	-	(Address of landlord)	
	Debtor claims that under applicable nonbankruptcy law, there are circ monetary default that gave rise to the judgment for possession, after	umstances under which the debto	•
	Debtor has included in this petition the deposit with the court of any repetition.	ent that would become due during	the 30-day period after the filing of the
	Debtor certifies that he/she has served the Landlord with this certifica	tion. (11 U.S.C. § 362(I)).	

Page 3

Voluntary Petition	Name of Debtor(s): DEBORAH CHAIRES
(This page must be completed and filed in every case)	
Sig	natures
	Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached. Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. X (Signature of Foreign Representative)
07/28/2008	
Date	Date
Signature of Attorney* X /s/ Kenneth S. Borcia Kenneth S. Borcia Bar No. 3125988 Kenneth S. Borcia & Associates 1117 S. Milwaukee., Suite A-3 P.O. Box 447 Libertyville, IL 60048 Phone No. (847) 634-8800 Fax No. (847) 634-8932 07/28/2008 Date The a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. Signature of Debtor (Corporation/Partnership) declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	Signature of Non-Attorney Bankruptcy Petition Preparer I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached. Printed Name and title, if any, of Bankruptcy Petition Preparer Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Address
Signature of Authorized Individual Printed Name of Authorized Individual	Date Signature of bankruptcy petiton preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above. Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.
Title of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
Date	A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

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Official Form 1, Exhibit D (10/06)

Document Page 4 of 38 UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS CHICAGO DIVISION (EASTERN)

IN RE:	DEBORAH CHAIRES	Case No.	
			(if known)

Debtor(s)

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days before the filing of my bankruptcy case , received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
2. Within the 180 days before the filing of my bankruptcy case , received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit couseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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Official Form 1, Exhibit D (10/06)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS CHICAGO DIVISION (EASTERN)

IN RE: **DEBORAH CHAIRES**Case No. (if known)

Debtor(s)

Bester (3)
EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT Continuation Sheet No. 1
☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]
Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.
 □ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ DEBORAH CHAIRES DEBORAH CHAIRES
Date: 07/28/2008

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B6A (Official Form 6A) (12/07)

In re DEBORAH CHAIRES	Case No.	
		(if known)

SCHEDULE A - REAL PROPERTY

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting Any Secured Claim or Exemption	Amount Of Secured Claim
home - 2121 Lewis Ave., North Chicago	100% interest		\$90,000.00	\$80,000.00

Total: \$90,000.00 (Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	DEBOR.	AH CI	HAIRES
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Case No.	
	(if known)

SCHEDULE B - PERSONAL PROPERTY

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
1. Cash on hand.		Cash	-	\$25.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	x			
3. Security deposits with public utilities, telephone companies, landlords, and others.	х			
4. Household goods and furnishings, including audio, video and computer equipment.		Refrigerator, stove,washer/dryer, bedroom furniture, kitchen living room furniture, audio, video & computer equipment, misc. household goods, dining room set	-	\$1,300.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.		Books, pictures & collections	-	\$35.00
6. Wearing apparel.		clothing	-	\$100.00
7. Furs and jewelry.		Furs & jewelry	-	\$40.00
8. Firearms and sports, photographic, and other hobby equipment.		sports & hobby equipment	-	\$25.00
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			

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B6B (Official Form 6B) (12/07) -- Cont.

In re	DEBOR.	AH CI	HAIRES
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Case No.	
	(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 1

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
10. Annuities. Itemize and name each issuer.	x			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	x			
16. Accounts receivable.	х			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			

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B6B (Official Form 6B) (12/07) -- Cont.

In re	DEBOR.	AH CI	HAIRES
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Case No.	
	(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 2

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	x			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	x			
22. Patents, copyrights, and other intellectual property. Give particulars.	x			
23. Licenses, franchises, and other general intangibles. Give particulars.	х			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. 101(41A)) provided to the debtor by individuals in connection with obtaining product or service from the debtor primarily for personal, family, or household purposes.	x			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1998 Ford	-	\$1,000.00
26. Boats, motors, and accessories.	х			

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B6B (Official Form 6B) (12/07) -- Cont.

In re DEBORAH CHAIRES	Case N
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Case No.	
	(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 3

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
27. Aircraft and accessories.	x			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	x			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
		3 continuation sheets attached		\$2.525.00

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B6C (Official Form 6C) (12/07)

In re DEBORAH C	HAIRES
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Case No.	
	(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: (Check one box)	Check if debtor claims a homestead exemption that exceeds \$136,875.
☐ 11 U.S.C. § 522(b)(2) ☐ 11 U.S.C. § 522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
home - 2121 Lewis Ave., North Chicago	735 ILCS 5/12-901	\$10,000.00	\$90,000.00
Cash	735 ILCS 5/12-1001(b)	\$25.00	\$25.00
Refrigerator, stove,washer/dryer, bedroom furniture, kitchen & living room furniture, audio, video & computer equipment, misc. household goods, dining room set	735 ILCS 5/12-1001(b)	\$1,300.00	\$1,300.00
Books, pictures & collections	735 ILCS 5/12-1001(b)	\$35.00	\$35.00
clothing	735 ILCS 5/12-1001(a), (e)	100%	\$100.00
Furs & jewelry	735 ILCS 5/12-1001(b)	\$40.00	\$40.00
sports & hobby equipment	735 ILCS 5/12-1001(b)	\$25.00	\$25.00
		\$11,525.00	\$91,525.00

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B6D (Official Form 6D) (12/07) In re **DEBORAH CHAIRES**

Case No.	
	(if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #:			DATE INCURRED: NATURE OF LIEN:					
Greenwich Finance 380 W. Palatine, Ste. 1 Wheeling, IL 60090		-	COLLATERAL: 1998 Ford REMARKS: Surrender				\$5,800.00	\$4,800.00
			VALUE: \$1,000.00					
ACCT #:	+		DATE INCURRED: NATURE OF LIEN:					
Habitat for Humanity 315 N. Martin Luther King Jr. Waukegan, IL 60085		-	COLLATERAL: Home REMARKS:				\$80,000.00	
			VALUE: \$90,000.00					
	•		Subtotal (Total of this F	_		- 1	\$85,800.00	\$4,800.00
Nocontinuation sheets attach	ed		Total (Use only on last p	Jag	e) >	•	\$85,800.00 (Report also on	\$4,800.00 (If applicable,

(Report also on Summary of Schedules.)

report also on Statistical Summary of Certain Liabilities and Related Data.)

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B6E (Official Form 6E) (12/07)

In re **DEBORAH CHAIRES**

Case No.	
	(If Known)

V	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
ΤY	PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)
	Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
	Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
	Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
	Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
	Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
	Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
	Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
	Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).
	Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).
	Administrative allowances under 11 U.S.C. Sec. 330 Claims based on services rendered by the trustee, examiner, professional person, or attorney and by any paraprofessional person employed by such person as approved by the court and/or in accordance with 11 U.S.C. §§ 326, 328, 329 and 330.
	nounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of istment.
	Nocontinuation sheets attached

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B6F (Official Form 6F) (12/07) In re **DEBORAH CHAIRES**

Case No.		
	(if known)	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	TNEGNITNOG	CONTINGENT	UNLIGOIDALED	DISPUTED	AMOUNT OF CLAIM
ACCT #: ACC International 919 Estes Court Schaumburg, IL 60193-4436		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for TCF					\$316.00
ACCT #: All Kids and Familycare P.O. Box 19121 Springfield, IL 62794-9121		_	DATE INCURRED: CONSIDERATION: REMARKS:					\$75.00
ACCT #: AMCA 2269 S. Saw Mill River Road, Bldg. 3 Elmsford, NY 10523		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for Quest					\$48.00
ACCT #: American Collection Corp. 919 Estes Ct. Schaumburg, IL 60193-4427		_	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for TCF National Bank					\$316.00
ACCT #: American Credit Bureau P.O. Box 4545 Boynton Beach, FL 33437		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for LSP					\$244.00
ACCT #: Armor Systems Corp. 2322 N. Green Bay Rd. Waukegan, IL 60085		-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS: Collecting for Northern Lake County Medical, Northern Lake Medical Co. and OB GYNE Associates					Notice Only
8continuation sheets attached		(Rep	(Use only on last page of the completed oort also on Summary of Schedules and, if applic Statistical Summary of Certain Liabilities and R	Sched able, c	Γot lule	al F	> .)	\$999.00

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B6F (Official Form 6F) (12/07) - Cont. In re DEBORAH CHAIRES

Case No.		
	(if known)	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODERTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPLITED	AMOUNT OF CLAIM
ACCT #: Arrow Financial Services 5996 W. Touhy Avenue Niles, IL 60714-4610		-	DATE INCURRED: CONSIDERATION: REMARKS:				\$501.00
ACCT #: Asset Acceptance Corp. P.O. Box 2036 Warren, MI 48090		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for SBC Illinois				\$807.00
ACCT #: Best Practices Inpatient Care 3880 Salem Lake Dr.,Ste. F Lake Zurich, IL 60047		-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: CBCS P.O. Box 165025 Columbus, OH 43216-5025		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for Lake Forest Hospital				\$218.00
ACCT #: Certified Services 1733 Washington Street, Suite 201 Waukegan, IL 60085		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for Lake County Anesthesiologist, Gurnee Radiology, Condell Medical Center, Northshore Center Gastroneotology, NHO MD,				\$24,303.00
			Chickies Deceased, Dr. Goldman and Dr. Emerzian				
Sheet no 1 of 8 continuation Schedule of Creditors Holding Unsecured Nonprior		ns	hed to S (Use only on last page of the completed Sort also on Summary of Schedules and, if applical Statistical Summary of Certain Liabilities and Rel	ched ole, o	ota ule n th	l > F.) ne	

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B6F (Official Form 6F) (12/07) - Cont. In re DEBORAH CHAIRES

Case No.		
	(if known)	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	FATCIAITIACO	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Representing: Certified Services			David Axelrod & Assoc. 1448 Old Skokie Road Highland Park, IL 60035					Notice Only
ACCT#: City of North Chicago 1850 Lewis Avenue North Chicago, IL 60064		-	DATE INCURRED: CONSIDERATION: REMARKS:					\$432.00
ACCT #: Columbia House P.O. Box 91601 Indianapolis, IN 46291-0601		-	DATE INCURRED: CONSIDERATION: REMARKS:					\$16.00
ACCT #: Consolidated Pathology Consultants 75 Remittance Drive, Suite 1895 Chicago, IL 60675-1895		-	DATE INCURRED: CONSIDERATION: REMARKS:					\$78.00
ACCT #: Credit Control P.O. Box 4635 Chesterfield, MO 63017		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for Vista Medical Ctr East					\$22.00
ACCT #: Credit Protection Association 13355 Noel Road Dallas, TX 75240	_	-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for Comcast					\$53.00
Sheet no. <u>2</u> of <u>8</u> continuation sh Schedule of Creditors Holding Unsecured Nonpriority (ns	hed to (Use only on last page of the complete ort also on Summary of Schedules and, if appoint Statistical Summary of Certain Liabilities and	ed Sched olicable,	Tot lule	al e F	> :.) e	\$601.00

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B6F (Official Form 6F) (12/07) - Cont. In re DEBORAH CHAIRES

Case No.		
	(if known)	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: Credit Systems Int, Inc. 1277 Country Club Lane Fort Worth, TX 76112-2304		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for Open MRI				\$666.00
ACCT#: Creditors Collection Bureau P.O. Box 63 Kankakee, IL 60901-0063		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for Excel Emergency Care				\$234.00
ACCT#: Dan K Hutson		-	DATE INCURRED: CONSIDERATION: REMARKS:				\$1,850.00
ACCT #: Dennis Brebner 860 Northpoint Blvd. Waukegan, IL 60085		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for WestmoreInad OB				\$148.00
ACCT #: Diversified Services P.O. Box 80185 Phoenix, AZ 85060-0185		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for Dianna Kim				\$5,546.00
ACCT #: First Premier Bank 3820 N. Louise Ave. Sioux Falls, SD 57107-0145		-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no 3 of 8 continuation s Schedule of Creditors Holding Unsecured Nonpriority		ns	hed to (Use only on last page of the completed Sort also on Summary of Schedules and, if applica Statistical Summary of Certain Liabilities and Rel	chedı ble, o	ota ule l n th	l > F.) ne	

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B6F (Official Form 6F) (12/07) - Cont. In re DEBORAH CHAIRES

Case No.		
	(if known)	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: Garden Pediatrics 6440 Grand Ave.,Ste. 202 Gurnee, IL 60031		-	DATE INCURRED: CONSIDERATION: REMARKS:				\$25.00
ACCT #: Keynote Consulting 1501 W. Dugdale, Ste#104 Buffalo Grove, IL 60089		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for Lake Shore Gastro.				\$407.00
ACCT #: Lake County Health Dept. 415 Washington St., Ste. 112 Waukegan, IL 60085		-	DATE INCURRED: CONSIDERATION: REMARKS:				\$57.00
ACCT #: Lake Forest Hospital 660 N. Westmoreland Road Lake Forest, IL 60045		-	DATE INCURRED: CONSIDERATION: REMARKS:				\$6,529.00
ACCT #: Midland Credit Management 8875 Aero Dr., Ste. 2 San Diego, CA 92123		-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS: Collecting for Aspire Visa				Notice Only
ACCT #: Midway Emergency Physicians 5665 New Northside Dr., Ste#320 Atlanta, GA 30328		-	DATE INCURRED: CONSIDERATION: REMARKS:				\$440.00
Sheet no. 4 of 8 continuation s Schedule of Creditors Holding Unsecured Nonpriority		ns	hed to (Use only on last page of the completed Sort also on Summary of Schedules and, if applica Statistical Summary of Certain Liabilities and Re	ched ble, o	ota ule on th	l > F.) ne	

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B6F (Official Form 6F) (12/07) - Cont. In re DEBORAH CHAIRES

Case No.		
	(if known)	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	FNEGNITNOC	UNLIQUIDATED	CHE IONIC	UISPOIED	AMOUNT OF CLAIM
ACCT #: Midwest Center or Women's Healthcare 4890 Paysphere Cir. Chicago, IL 60674		-	DATE INCURRED: CONSIDERATION: REMARKS:					\$5,546.00
ACCT #: Money Control P.O. Box 49990 Riverside, CA 92508		-	DATE INCURRED: CONSIDERATION: REMARKS:					\$807.00
ACCT #: NCO Financial Systems P.O. Box 41418 Dept. 13 Philadelphia, PA 19101		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for Sprint					\$341.00
ACCT #: North Shore Sanitary District P.O. Box 2140 Bedford Park, IL 60499		-	DATE INCURRED: CONSIDERATION: REMARKS:					\$201.00
ACCT #: Orion Anesthesia Assoc. P.O. Box 991 Park Ridge, IL 60068		-	DATE INCURRED: CONSIDERATION: REMARKS:					\$1,519.00
ACCT #: Pro Com Services P.O. Box 202 Springfield, IL 62705		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for Consolidated Pathologists					\$60.00
Sheet no. <u>5</u> of <u>8</u> continuation she Schedule of Creditors Holding Unsecured Nonpriority C		าร	hed to S (Use only on last page of the completed Scoort also on Summary of Schedules and, if applicate Statistical Summary of Certain Liabilities and Related	hed le, c	ota ule on th	ıl > F.) he		\$8,474.00

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B6F (Official Form 6F) (12/07) - Cont. In re DEBORAH CHAIRES

Case No.		
	(if known)	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	TNEGNITNOC	INIIOIIIDATED	סואבומסוסאבורם	DISPUTED	AMOUNT OF CLAIM
ACCT #: Professional Account Management 2040 W. Wisconsin Milwaukee, WI 53233		-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS: Collecting for TCF Bank					Notice Only
ACCT#: Publishers Clearing House 382 Channel Dr. Port Washington, NY 11050		-	DATE INCURRED: CONSIDERATION: REMARKS:					\$33.00
ACCT #: Quest Diagnostics 1355 Mittle Blvd. Attn:Patient Billing Wood Dale, IL 60191-1024		-	DATE INCURRED: CONSIDERATION: REMARKS:					\$21.00
ACCT #: RJM Acquisitions Funding 575 Underhill Blvd., Ste. 224 Syosset, NY 11791		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for Washington Mutual					\$120.00
ACCT #: Senex Services 3500 DePauw Blvd., Ste. 3050 Indianapolis, IN 46268-6135		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for Vista Victory and Vista St. Therese					\$11,011.00
ACCT #: State Collection Service P.O. Box 6250 Madison, WI 53701		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for ACL Laboratories					\$236.00
Sheet no. <u>6</u> of <u>8</u> continuation sh Schedule of Creditors Holding Unsecured Nonpriority (าร	hed to (Use only on last page of the complete port also on Summary of Schedules and, if app Statistical Summary of Certain Liabilities and	d Sched licable, c	Tota ule on t	al > F. he)	\$11,421.00

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B6F (Official Form 6F) (12/07) - Cont. In re DEBORAH CHAIRES

Case No.		
	(if known)	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	FIATCIAIT	CONTINGEN	UNCIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: Sunrise Credit Services P.O. Box 9100 Farmingdale, NY 11735-9100		-	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for Wamu/RJM Acquistions					\$121.00
ACCT #: The Doctors Offices 2606 Elisha Avenue Zion, IL 60099		-	DATE INCURRED: CONSIDERATION: REMARKS:					\$179.00
ACCT #: Transworld Systems, Inc. 25 Northwest Pt. Blvd., Suite 750 Elk Grove Village, IL 60007		_	DATE INCURRED: CONSIDERATION: REMARKS: Collecting for Best Practices in Patient					\$66.00
ACCT #: Victory Memorial Hospital 1324 N. Sheridan Road Waukegan, IL 60085		-	DATE INCURRED: CONSIDERATION: REMARKS:					\$5,378.00
ACCT #: Vista Medical Center West 99 Greenwood Ave. Waukegan, IL 60087-5136		-	DATE INCURRED: CONSIDERATION: REMARKS:					\$63.00
ACCT #: Waukegan Clinic Corporation P.O. Box 504370 Saint Louis, MO 63150-4370		-	DATE INCURRED: CONSIDERATION: REMARKS:					\$16.00
Sheet no 7 of 8 continuation sh Schedule of Creditors Holding Unsecured Nonpriority		ns	hed to (Use only on last page of the completer ort also on Summary of Schedules and, if appl Statistical Summary of Certain Liabilities and	d Sched icable,	Total Jule	al : F.)	\$5,823.00

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B6F (Official Form 6F) (12/07) - Cont. In re DEBORAH CHAIRES

Case No.		
	(if known)	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #:			DATE INCURRED: CONSIDERATION:				
Xavier Parreno Internal Medicine 2605 W. Grand Ave. Waukegan, IL 60085		•	REMARKS:				\$546.00
Sheet no. 8 of 8 continuation sheets attached to Subtotal > Schedule of Creditors Holding Unsecured Nonpriority Claims					•	\$546.00	
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)				F.) ie	\$69,595.00		

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B6G (Official Form 6G) (12/07)

In re **DEBORAH CHAIRES**

Case No.		
	(if known)	

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases of contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR' INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAPROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

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B6H (Official Form 6H) (12/07)

In re **DEBORAH CHAIRES**

Case No.	
	(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eightyear period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

-1-41-1-1-

Check this box if debtor has no codebtors.		
NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR	

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B6I (Official Form 6I) (12/07)

In re **DEBORAH CHAIRES**

Case No.	
	(if known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Relationship(s): child Age(s): Relationship(s): Age(s):	Debtor's Marital Status:	Dependents of Debtor and Spouse			
Occupation Nursing Home Worker Terrace Nursing Home How Long Employer 1615 Sunset Ave. Waukegan, IL 60087 INCOME: (Estimate of average or projected monthly income at time case filed) I. Monthly gross wages, salary, and commissions (Prorate if not paid monthly) S. Setimate monthly overtime S. SUBTOTAL LESS PAYROLL DEDUCTIONS a. Payroll taxes (includes social security tax if b. is zero) S. D. Social Security Tax c. Medicare d. Insurance e. Union dues f. Retirement g. Other (Specify) h. Other (Specify) h. Other (Specify) k. Other (Specify) S. UBTOTAL DEDUCTIONS S. SUBTOTAL OF PAYROLL DEDUCTIONS Income from real property S. SUBTOTAL OF PAYROLL DEDUCTIONS S. TREQUE income from operation of business or profession or farm (Attach detailed stmt) Income from real property S. O. ON Income from real property S. O. ON S. ON	Single	Relationship(s): child Age(s):	Relationship(s	s):	Age(s):
Occupation Nursing Home Worker Terrace Nursing Home How Long Employer 1615 Sunset Ave. Waukegan, IL 60087 INCOME: (Estimate of average or projected monthly income at time case filed) \$2,221.94\$ INCOME: (Estimate of average or projected monthly income at time case filed) \$2,221.94\$ Income the monthly gross wages, salary, and commissions (Prorate if not paid monthly) \$2,221.94\$ Income the monthly overtime \$2,0.00\$ SUBTOTAL \$2,237.78\$ Income the security Tax \$2,221.94\$ LESS PAYROLL DEDUCTIONS Income the security Tax \$3,0.00\$ Income from real property \$2,0.00\$ Income from real property \$2,0.00\$ Income from real property \$3,0.00\$ Income from real property \$3,0.00	_				
Occupation Nursing Home Worker Terrace Nursing Home How Long Employer 1615 Sunset Ave. Waukegan, IL 60087 INCOME: (Estimate of average or projected monthly income at time case filed) I. Monthly gross wages, salary, and commissions (Prorate if not paid monthly) S. Setimate monthly overtime S. SUBTOTAL LESS PAYROLL DEDUCTIONS a. Payroll taxes (includes social security tax if b. is zero) S. D. Social Security Tax c. Medicare d. Insurance e. Union dues f. Retirement g. Other (Specify) h. Other (Specify) h. Other (Specify) k. Other (Specify) S. UBTOTAL DEDUCTIONS S. SUBTOTAL OF PAYROLL DEDUCTIONS Income from real property S. SUBTOTAL OF PAYROLL DEDUCTIONS S. TREQUE income from operation of business or profession or farm (Attach detailed stmt) Income from real property S. O. ON Income from real property S. O. ON S. ON		D.L.			
Name of Employer Terrace Nursing Home How Long Employed Address of Employer 1615 Sunset Ave. Waukegan, IL 60087 1615 Sunset Ave. Waukegan, IL 60087			Spouse		
How Long Employed Address of Employer 1615 Sunset Ave. Waukegan, IL 60087 Name					
Address of Employer		Terrace Nursing Home			
NCOME: (Estimate of average or projected monthly income at time case filed) DEBTOR SPOUSE		1615 Support Avo			
INCOME: (Estimate of average or projected monthly income at time case filed) DEBTOR \$POUSE	Address of Employer				
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly) \$2,221,94 2. Estimate monthly overtime \$0.00 3. SUBTOTAL \$2,221,94 4. LESS PAYROLL DEDUCTIONS		waukegan, it 60067			
Substitute monthly overtime \$0.00	INCOME: (Estimate of a)	verage or projected monthly income at time case filed)		DEBTOR	SPOUSE
\$2,221.94 \$2,221.94					
4. LESS PAYROLL DEDUCTIONS a. Payroll taxes (includes social security tax if b. is zero) b. Social Security Tax c. Medicare d. Insurance e. Union dues f. Retirement g. Other (Specify) h. Other (Specify) i. Other (Specify) j. Other (Specify) l. Other (Specify) j. Other (Specify) l. Other (Specify) s. Outher (Specify) l. Other of (Specify) l. Other monthly income (Specify): a.		ertime	_	\$0.00	
a. Payroll taxes (includes social security tax if b. is zero) b. Social Security Tax c. Medicare d. Medicare d. Insurance e. Union dues f. Retirement g. Other (Specify) h. Other (Specify) i. Other (Specify) k. Other (Specify) k. Other (Specify) TOTAL NET MONTHLY TAKE HOME PAY Regular income from real property lncome from real property lncome from real property social security or government assistance (Specify): Social security or government assistance (Specify): Pension or retirement income Other monthly income (Specify): SUBTOTAL OF LINES 7 THROUGH 13 SUBTOTAL OF LINES 7 THROUGH 13 SUBTOTAL OF LINES 7 THROUGH (Add amounts shown on lines 6 and 14) SIBST-49 STAGE SIBST-71 Social security or government assistance (Add amounts shown on lines 6 and 14) SUBTOTAL OF LINES 7 THROUGH (Add amounts shown on lines 6 and 14) SIBST-49		OLIOTIONO.		\$2,221.94	
b. Social Security Tax				¢272 70	
c. Medicare d. Insurance e. Union dues f. Retirement g. Other (Specify) h. Other (Specify) i. Other (Specify) j. Other (Specify) j. Other (Specify) subtrock (Specify					
d. Insurance e. Union dues f. Retirement g. Other (Specify) h. Other (Specify) i. Other (Specify) j. Other (Specify) k. Other (Specify) so.00 k. Other (Specify) so.00 5. SUBTOTAL OF PAYROLL DEDUCTIONS standard (Specify) so.00 lincome from operation of business or profession or farm (Attach detailed stmt) lincome from real property so.00 lincome from real property				·	
e. Union dues f. Retirement g. Other (Specify) h. Other (Specify) i. Other (Specify) j. Other (Specify) k. Other (Specify) SUBTOTAL OF PAYROLL DEDUCTIONS SUBTOTAL OF PAYROLL DEDUCTIONS TOTAL NET MONTHLY TAKE HOME PAY Regular income from operation of business or profession or farm (Attach detailed stmt) lncome from real property Interest and dividends Social security or government assistance (Specify): Pension or retirement income Cube Total Net Month (Specify): Subtotal Specify): Subtotal Specify: Subtotal Of LINES 7 THROUGH 13 Subtotal Specify: Subtotal Of LINES 7 THROUGH 13 Subtotal Specify: Subt					
g. Other (Specify) h. Other (Specify) i. Other (Specify) j. Other (Specify) k. Other (Specify) k. Other (Specify) k. Other (Specify) so.00 so.00 5. SUBTOTAL OF PAYROLL DEDUCTIONS 5. TOTAL NET MONTHLY TAKE HOME PAY 7. Regular income from operation of business or profession or farm (Attach detailed stmt) lncome from real property so.00 lncome from real property so.00 lnterest and dividends lnterest and dividends so.00 lnterest and dividends so.00 local security or government assistance (Specify): 2. Pension or retirement income social security or government (Specify): social security or government (Speci					
h. Other (Specify) i. Other (Specify) j. Other (Specify) k. Other (Specify) S0.00 k. Other (Specify) S0.00 S					
Subtrotal of Payroll Deductions \$0.00	g. Other (Specify)				
Subtrotal of Payroll Deductions \$0.00	h. Other (Specify)				
k. Other (Specify) \$0.00 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$530.45 6. TOTAL NET MONTHLY TAKE HOME PAY \$1,691.49 7. Regular income from operation of business or profession or farm (Attach detailed stmt) \$0.00 8. Income from real property \$0.00 9. Interest and dividends \$0.00 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above \$0.00 11. Social security or government assistance (Specify): \$136.00 12. Pension or retirement income \$0.00 13. Other monthly income (Specify): \$0.00 14. SUBTOTAL OF LINES 7 THROUGH 13 15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14) \$1,827.49	i. Other (Specify)			·	
5. SUBTOTAL OF PAYROLL DEDUCTIONS 6. TOTAL NET MONTHLY TAKE HOME PAY 7. Regular income from operation of business or profession or farm (Attach detailed stmt) 8. Income from real property 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): Pension or retirement income					
6. TOTAL NET MONTHLY TAKE HOME PAY 7. Regular income from operation of business or profession or farm (Attach detailed stmt) 8. Income from real property 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): 12. Pension or retirement income 13. Other monthly income (Specify): a. b. c. b. c. 14. SUBTOTAL OF LINES 7 THROUGH 13 15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14) \$1,691.49 \$1,691.49 \$1,691.49 \$1,000 \$0.00 \$0.00 \$0.00 \$1,827.49	· · · · · · · · · · · · · · · · · · ·	ROLL DEDUCTIONS	Г		
7. Regular income from operation of business or profession or farm (Attach detailed stmt) 8. Income from real property 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): 12. Pension or retirement income 13. Other monthly income (Specify): a. b. c. 14. SUBTOTAL OF LINES 7 THROUGH 13 15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14) \$0.00 \$0.00 \$0.00 \$0.00 \$136.00 \$0.00 \$136.00 \$136.00 \$136.00			-		
 8. Income from real property 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): Pension or retirement income			L uiled stmt)		
9. Interest and dividends \$0.00 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): Pension or retirement income			anou ourne)		
that of dependents listed above 11. Social security or government assistance (Specify): Pension or retirement income				·	
11. Social security or government assistance (Specify): \$136.00 12. Pension or retirement income \$0.00 13. Other monthly income (Specify): \$0.00 a	10. Alimony, maintenance	e or support payments payable to the debtor for the debt	tor's use or	\$0.00	
\$136.00 12. Pension or retirement income \$0.00 13. Other monthly income (Specify): a.					
12. Pension or retirement income \$0.00 13. Other monthly income (Specify): \$0.00 a. \$0.00 b. \$0.00 c. \$0.00 14. SUBTOTAL OF LINES 7 THROUGH 13 \$136.00 15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14) \$1,827.49	11. Social security or gov	vernment assistance (Specify):		# 400.00	
13. Other monthly income (Specify): a.	12 Danaian ar ratiraman	t income			
a. \$0.00 b. \$0.00 \$0.00 \$0.00 \$1.00				φυ.υυ	
b. \$0.00 c. \$0.00 14. SUBTOTAL OF LINES 7 THROUGH 13 \$136.00 15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14) \$1,827.49		o (Opcony).		\$0.00	
14. SUBTOTAL OF LINES 7 THROUGH 13 \$136.00 15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14) \$1,827.49	. —				
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14) \$1,827.49	С.				
	14. SUBTOTAL OF LINE	S 7 THROUGH 13		\$136.00	
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15) \$1,827.49	15. AVERAGE MONTHL	Y INCOME (Add amounts shown on lines 6 and 14)		\$1,827.49	
	16. COMBINED AVERAGE	GE MONTHLY INCOME: (Combine column totals from lin	ne 15)	\$1,	827.49

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

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B6J (Official Form 6J) (12/07)

IN RE: **DEBORAH CHAIRES**

c. Monthly net income (a. minus b.)

Case No.	
	(if known)

\$14.49

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at tin payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculating from the deductions from income allowed on Form 22A or 22C.	
Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schlabeled "Spouse."	hedule of expenditures
Rent or home mortgage payment (include lot rented for mobile home)	\$628.00
a. Are real estate taxes included? ☑ Yes ☐ No	
b. Is property insurance included? ✓ Yes □ No	
2. Utilities: a. Electricity and heating fuel	\$225.00
b. Water and sewer	\$50.00
c. Telephone	\$60.00
d. Other:	
Home maintenance (repairs and upkeep) Food	\$325.00
5. Clothing	\$60.00
6. Laundry and dry cleaning	
7. Medical and dental expenses	\$50.00
8. Transportation (not including car payments)	\$260.00
Recreation, clubs and entertainment, newspapers, magazines, etc. Charitable contributions	
11. Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner's or renter's	
b. Life	
c. Health d. Auto	\$80.00
e. Other:	\$60.00
12. Taxes (not deducted from wages or included in home mortgage payments)	
Specify:	
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	
a. Auto:	
b. Other:	
c. Other: d. Other:	
14. Alimony, maintenance, and support paid to others:15. Payments for support of add'l dependents not living at your home:	
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	
17.a. Other: See attached personal expenses	\$75.00
17.b. Other:	
 AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) 	\$1,813.00
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following document:	g the filing of this
20. STATEMENT OF MONTHLY NET INCOME	
a. Average monthly income from Line 15 of Schedule I	\$1,827.49
b. Average monthly expenses from Line 18 above	\$1,813.00

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UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
CHICAGO DIVISION (EASTERN)

IN RE: **DEBORAH CHAIRES** CASE NO

CHAPTER 7

EXHIBIT TO SCHEDULE J

Itemized Personal Expenses

Expense		Amount
personal care postage, gifts, bank charges etc		\$40.00 \$25.00
State Registration & City Sticker		\$10.00
	Total >	\$75.00

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B6 Summary (Official Form 6 - Summary) (12/07)

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

CHICAGO DIVISION (EASTERN)

In re DEBORAH CHAIRES Case No.

Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
- Real Property	Yes	1	\$90,000.00		
- Personal Property	Yes	4	\$2,525.00		
- Property Claimed as Exempt	Yes	1		'	
- Creditors Holding Secured Claims	Yes	1		\$85,800.00	
Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$0.00	
- Creditors Holding Unsecured Nonpriority Claims	Yes	9		\$69,595.00	
 Executory Contracts and Unexpired Leases 	Yes	1			
- Codebtors	Yes	1			
- Current Income of Individual Debtor(s)	Yes	1			\$1,827.49
- Current Expenditures of Individual Debtor(s)	Yes	2			\$1,813.00
	TOTAL	22	\$92,525.00	\$155,395.00	

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Form 6 - Statistical Summary (12/07)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS CHICAGO DIVISION (EASTERN)

In re **DEBORAH CHAIRES**

Case No.

Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11, or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$0.00
Student Loan Obligations (from Schedule F)	\$0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$407.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$0.00
TOTAL	\$407.00

State the following:

Average Income (from Schedule I, Line 16)	\$1,827.49
Average Expenses (from Schedule J, Line 18)	\$1,813.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$1,997.93

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$4,800.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0.00
4. Total from Schedule F		\$69,595.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$74,395.00

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In re **DEBORAH CHAIRES**

Case No.	
	(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

declare under penalty of perjury that I have read the fo sheets, and that they are true and correct to the best of my k	• • • • • • • • • • • • • • • • • • • •	24
Date <u>07/28/2008</u>	Signature /s/ DEBORAH CHAIRES DEBORAH CHAIRES	
Date	Signature	
	[If joint case, both spouses must sign.]	

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B7 (Official Form 7) (12/07)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS **CHICAGO DIVISION (EASTERN)**

In re:	DEBORAH CHAIRES	Case No.	
			(if known)

						(if known)		
			STATE	MENT OF FINAN	ICIAL AFFAIRS			
	1. Income from emple	oymei	nt or operatio	n of business				
None	State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)							
	AMOUNT	SOUR	_					
	\$21,853.00 \$21,023.00	2007	Wages, Only the Joint Wages Joint Wages	hose wages previousl	y reported on Sch. I			
	2. Income other than	from	employment	or operation of busi	ness			
None 🗹								
	3. Payments to credit	ors						
	Complete a. or b., as appr	opriate	e, and c.					
None								
				DATES OF				
	NAME AND ADDRESS OF Habitat for Humanity 315 N. Martin Luther & Waukegan, IL 60085			PAYMENTS	AMOUNT PAID \$628.00	AMOUNT STILL OV \$80,000.00	VING	
None	b. Debtor whose debts are preceding the commencem \$5,475. If the debtor is an i obligation or as part of an a (Married debtors filing unde petition is filed, unless the s	ent of the ndividu Iternativ r chapte	he case unless th al, indicate with a ve repayment sch er 12 or chapter 1	ne aggregate value of all p un asterisk (*) any paymen nedule under a plan by an 13 must include payments	roperty that constitutes or ts that were made to a cre approved nonprofit budge and other transfers by eith	is affected by such transfe ditor on account of a dome ting and credit counseling a	r is less than estic support agency.	
None	c. All debtors: List all payn who are or were insiders. (•					

not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER none, except for creditors previously listed

NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION

STATUS OR **DISPOSITION** Case 08-19982 Doc 1 Filed 07/31/08 Entered 07/31/08 16:12:04 Desc Main

B7 (Official Form 7) (12/07) - Cont.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS CHICAGO DIVISION (EASTERN)

n re:	DEBORAH CHAIRES	Case No.	
			(if known)

		T OF FINANCIAL AF	FAIRS				
None	b. Describe all property that has been attached, garnished of the commencement of this case. (Married debtors filing under both spouses whether or not a joint petition is filed, unless the	er chapter 12 or chapter 13 mus	t include information concerning property of either or				
None	List all property that has been repossessed by a creditor. Sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned						
None	6. Assignments and receiverships a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)						
None	b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the						
None	7. Gifts List all gifts or charitable contributions made within one year gifts to family members aggregating less than \$200 in value per recipient. (Married debtors filing under chapter 12 or charical joint petition is filed, unless the spouses are separated and a	per individual family member a apter 13 must include gifts or co	nd charitable contributions aggregating less than \$100				
None	List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the						
None	9. Payments related to debt counseling or bankruptcy List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.						
	NAME AND ADDRESS OF PAYEE Kenneth Borcia & Associates 1117 S. Milwaukee., Suite A-3 Libertyville, Illinois 60048	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 07/7/2008	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$50.00				

The Institute of Financial Literacy P.O. Box 1842 Portland, ME 04104 7/15/08 \$50

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B7 (Official Form 7) (12/07) - Cont.

Document Page 33 of 38 UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS **CHICAGO DIVISION (EASTERN)**

n re:	DEBORAH CHAIRES	Case No.	
			(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 2

N	~~

10. Other transfers

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None \square

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None $\sqrt{}$

11. Closed financial accounts

12. Safe deposit boxes

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

None

 $\overline{\mathbf{V}}$

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None

 \square

List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

None

spouse.

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied \square during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

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B7 (Official Form 7) (12/07) - Cont.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS CHICAGO DIVISION (EASTERN)

n re:	DEBORAH CHAIRES	Case No.	
			(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 3

17	Envir	nmenta	I Info	rmation

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material.

Indicate the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

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B7 (Official Form 7) (12/07) - Cont.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS CHICAGO DIVISION (EASTERN)

In re: DEBORAH CHAIRES Case No. (if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 4

[If completed by an individual or individual and spouse]	
declare under penalty of perjury that I have read the a attachments thereto and that they are true and correct.		the foregoing statement of financial affairs and any
Date 07/28/2008	Signature	/s/ DEBORAH CHAIRES
	of Debtor	DEBORAH CHAIRES
Date	Signature	
	of Joint Debto	
	(if any)	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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Official Form 8 (10/05)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS CHICAGO DIVISION (EASTERN)

IN RE: **DEBORAH CHAIRES** CASE NO

CHAPTER 7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

have filed a schedule of asse	ets and liabilities which include	des consun	ner debts secu	red by propert	y of the estate.	
☐ have filed a schedule of exec	cutory contracts and unexpire	ed leases v	which includes	personal prop	erty subject to an	unexpired lease.
intend to do the following with	h respect to the property of the	he estate v	vhich secures t	hose debts or	is subject to a lea	se:
Description of Secured Property	Creditor's Name		Property will be surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
1998 Ford	Greenwich Finance 380 W. Palatine, Ste. 1 Wheeling, IL 60090	·	Ø			
Description			Lease will I	· ·		
of Leased	Lessor's		to 11 U.S.	I		
Property	Name		362 § h)(1			
None		•				
Date <u>07/28/2008</u>		Signature _	/s/ DEBORAH	CHAIRES		
		1	DEBORAH CHA	IRES		
Date		Signature _				

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B201 (04/09/06)

Document Page 37 of 38 UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS CHICAGO DIVISION (EASTERN)

IN RE: **DEBORAH CHAIRES**

NOTICE TO INDIVIDUAL CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days BEFORE the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13:</u> Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under Chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

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IN RE: **DEBORAH CHAIRES**

Phone: (847) 634-8800 Fax: (847) 634-8932

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Compliance with § 342(b) of the Bankruptcy Code

		` '		
I, Kenneth S. Borcia	counsel for Deb	tor(s), hereby certify tha	t I delivered to the Debtor(s) the Notice
required by § 342(b) of the Bankruptcy Co	ode.			
/s/ Kenneth S. Borcia		_		
Kenneth S. Borcia, Attorney for Debtor(s)				
Bar No.: 3125988				
Kenneth S. Borcia & Associates				
1117 S. Milwaukee., Suite A-3				
P.O. Box 447				
Libertyville, IL 60048				

Certificate of the Debtor

(We), the debtor(s), affirm that I (we) have received and read this notice.

DEBORAH CHAIRES	X _/s/ DEBORAH CHAIRES	07/28/2008
	Signature of Debtor	Date
Printed Name(s) of Debtor(s)	X	
Case No. (if known)	Signature of Joint Debtor (if any)	Date